MARSH CANADA LIMITED Suite 301, PCS Tower 122 – 1st Avenue South

Saskatoon, Saskatchewan S7K 7E5

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e-mail:

School Incident Report Form For Insurance Purposes

		Name of School Division:			
		ne and Address of School:	a.m. □ /		
1	Date of Incident M/D/Y: Description of How Incident Occurred: Time		: p.m. 7 Telephone # () -		
G E N E R A L	(1)	Name: Teacher/Instructor/Other: Witness Activity at Time: Name: Teacher/Instructor/Other: Witness Activity at Time:	Location of Incident: L01	L12 Playing Fields L13 Playground Equipment L14 Pool L15 Rink L16 Sidewalks/Roads Off Facility Property L17 Stairs with Building L18 Stairs/Sidewalks within Grounds L19 Washrooms/Changing Rooms/Showers L20 Other – (please explain)	
_		Name of Person Involved:	LTT Parking Lot	Age: M/F:	
_		Address: Postal Co	ode: Grade/Year	/Night School:	
2			,	pols Only)	
		Student/Visitor/Other: (explain)	Division/Program: Notified? ☐ Yes ☐		
age		Parent/Guardian/Emergency Contact: Telephone #: () -	Notilied?Tes _		
Jam		Parent/Guardian/Emergency Contact Instructions:			
ıţ		Emergency Treatment: Yes No What?	By Whor	m?	
r Pa		Advised to Seek Medical Treatment: Yes No Wh	ere? Hospitaliz	ed Overnight?	
A" A		How Transported?			
For Bodily Injury / Other Party Damage complete Section "A"	S E C T I O N A	Nature of Injury/Damage: N01	Body Area: B01	B09 Multiple Areas B10 Neck B11 No Information B12 Spine/Back B13 Teeth/Mouth B14 Other – (please explain) A08 Travel to or from Facility A09 Unorganized Sports	
COMPLETE THE APPROPRIATE		C04 Drowning C13 Poison/Allergic C05 Exposure to Flame/ Electricity/Hot or C14 School Bus Accident Caustic Substance C15 Sports Injury C06 Fall at Same Height C16 Struck Against Person C07 Fall from Different C17 Struck/Crushed By/ Height Against Object C08 Fatigue/Over Exertion C18 Other – (please explain) C09 Foreign Body Property Involved (describe property involved and extent of	(i.e. Club) A04 Out-Of-Class Field Trip A05 Recess/Pre-Or Post Class/Noon Hour A06 Sports Event A07 Sported Related Class	A10 Work Placement A11 Maintenance Activity A12 Other – (please explain)	
	S				
nd/or	E	Fire Depositment Attended D. D. V. D. V.	Course of Leas/Domestic		
ıŧy a B", a	С	Fire Department Attended? Yes No Report Number:	Cause of Loss/Damage: C01 ☐ Burglary/Forcible Entry		
-acil ion "	T	Were Police Notified? ☐ Yes ☐ No	C02 Collapse C03 Dishonesty/Infidelity	C11 ☐ Smoke C12 ☐ Theft	
Sect	ı	Branch/Detachment:	C04 Explosion	C13 Transportation	
nage ete	O	Case Number:	C05 Falling Object C06 Fire/Lightning	C14 Vandalism/ Malicious Acts	
. Dar	N	Date (M/D/Y): Time: : a.m. / p.m.	C07 Glass Breakage	C15 Water Escape/	
For Loss or Damage to Facility and/or Contents complete Section "B"	В	Were There Visible Signs of Forced Entry? Yes No What? (explain)	C08 Impact By Vehicle/Aircraft C09 Riot	Rupture/Freezing C16 Windstorm/Hail C17 Other – (please explain)	
	Nan	ne of Person Completing Report:			
3	Nan	(Please Print or Type) ne of Administrator:	(Signature)		
	INAII	(Please Print or Type)	(Signature)		
	Date	9:			

Please Ensure that Serious Injury or Property Damage is Reported by telephone or fax to Marsh Canada, the Insurer, or the Local Approved Adjuster, at the Numbers Above. Please e-mail or fax to Marsh Canada Limited. Retain a copy at the school and file a copy at the Board Office.